POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<u>. </u>		
O.I.P.E. CLASSIFIER		59	5311
FORMALITY REVIEW	-i.H	70844	6 07
RESPONSE FORMALITY REVIEW	A-5	945	10-12-1

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Restricted 0 Objected								
Claim Date	Claim Date	Claim	Date					
Criginal Original A 1802	Original Origina Original Origina Origina Origina Origina Original	<u></u>						
rinal Conginal Ar 14 14 16 2	Final X 812 PA	Final						
	E 8 & 2 V							
	(1) x 3 N	101						
3	52	102	+++++++++++++++++++++++++++++++++++++++					
4		103						
5 1 1 2	54 55	104	 - - - - - - - - - - - - - - - - - - -					
6 11 11	56	105	+++++++					
 	57	107						
8 1 1 1	58	108	+++++					
9	59	109	++					
10	60	110	 					
111 11 11 1	61 7 1	111						
12	62	112	 					
13	63	113						
14	64	114						
15	65	115						
16 /	66	116						
17	67	117						
18	68	118						
19	69	119						
20	70	120						
21 /	71	121						
22	72	122						
23 //	73	123						
24	74	124						
25	75	125						
26	76	126						
27	77	127						
28	78	128						
29	79	129						
30	80	130						
31 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	81	131						
32 1	82 83	132	+++-+-					
34 / /	84	133	+					
35 N	85	135						
36	86	136	+++++					
37	87	137	+ + + + + + + + + + + + + + + + + + + +					
38	88	138	 					
39	89	139	+ + + + + + + + + + + + + + + + + + + +					
(60)	90	140	++++++++++					
41	91	141						
	92	142	 					
	93	143	 					
(44)	94	144						
(5)	95	145	 					
₩6)	96	146						
(2)	97	147						
Ke I I I I I I I I I I I I I I I I I I I	98	148						
42 11 1	99	149						
42 44 45 46 47 48 50	100	150						

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY